



EVALBRIEF: SYSTEMS OF CARE

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Strategies for Sustaining Systems of Care

A special study on the sustainability of systems of care was undertaken as part of the national evaluation of the *Comprehensive Community Mental Health Services for Children and their Families Program*. The purpose was to learn how the experiences of earlier grantees could inform current and future grantees about ways to maximize the likelihood their systems of care will be maintained over time.

Methods

The study method includes a Web-based survey completed by four key stakeholders in each graduated site and in sites nearing graduation, and follow-up telephone interviews conducted with two of the respondents from each community to further explore factors and strategies that affect the maintenance of systems of care. In addition, a telephone interview is conducted with the children's mental health director at the State level in each State corresponding to the local sites included in the study. The purpose was to obtain a State perspective on maintaining systems of care over time. This evaluation brief reviews factors affecting sustainability and sustainability strategies to assist communities maintaining their systems over time in 25 sites funded in 1993 or 1994 (Phase I) after graduating from the program.

Factors Affecting Sustainability

The study explored the impact of a range of factors on the maintenance of systems of care, regardless of their impact. As shown on Table 1, two factors were characterized as having a somewhat negative influence on maintenance of systems of care: (a) changes in elected or appointed officials and, predictably, (b) changes in the larger economic

Study Highlights

- ▶ ***This study explored the impact of several strategies on the sustainability of systems of care after Federal grant funding has ended.***
- ▶ ***Sites reported that active efforts must focus on maximizing several sustainability strategies if systems of care are to be maintained.***
- ▶ ***Sites identified the following strategies as most effective at promoting sustainability:***
 - ***Cultivating strong interagency relationships and infusing the approach into the broader system.***
 - ***Involving stakeholders and promoting a strong family organization.***
 - ***Creating an ongoing focal point for system management and pursuing appropriate policy/regulatory changes.***
 - ***Identifying increased State funding from mental health, partner agencies, and Medicaid to finance services and supports.***
 - ***Using evaluation results to demonstrate program effectiveness.***

Table 1
Impact of Factors on Sustainability

| Factors | Phase I Sites: Impact Rating |
|--|---|
| Factors with Most Positive Impact | |
| Inclusion of key stakeholders in the system of care at all levels | 4.49 |
| Interagency relationships and partnerships | 4.43 |
| Existence of ongoing administrative leadership for the system of care | 4.36 |
| Local commitment to the system-of-care approach | 4.34 |
| Provision of ongoing training | 4.24 |
| Existence of a constituency | 4.15 |
| Existence of evaluation/accountability documentation on the effectiveness of systems of care | 4.15 |
| State commitment to the system-of-care approach | 4.13 |
| Presence of a “champion” committed to the system-of-care approach who has used power/ influence to focus community resources and energy | 4.12 |
| Infusion of the services/system of care into the larger system (vs. maintaining separate “project or program”) | 4.12 |
| State involvement in the system of care | 4.00 |
| State financial support for system-of-care approach | 3.88 |
| Existence of formal policies/regulations supportive of systems of care | 3.87 |
| Engagement of political/policy leaders | 3.86 |
| Local financial support for system-of-care approach | 3.81 |
| Increased utilization/reliance on Medicaid to finance system | 3.76 |
| Factors with Neither Positive Nor Negative Impact | |
| Implementation of managed care approaches | 3.32 |
| Factors with Most Negative Impact | |
| Changes in larger economic climate | 2.82 |
| Changes in elected/appointed officials | 2.79 |

Scale: 1 = Very negative impact, 2 = Somewhat negative impact, 3 = Neither positive nor negative impact, 4 = Somewhat positive impact, 5 = Very positive impact.

climate. Nearly all of the other factors were characterized as having a positive or somewhat positive influence on maintaining systems of care. Factors identified by the sites as having the most positive impact on sustainability (see Table 1) as a group represent conditions that ensure knowledge of and commitment to the system-of-care philosophy and approach among stakeholders, partner agencies, leaders, State and local governments, and advocates and “champions.” In addition, the notion of infusing the system-of-care approach into the larger system, rather than maintaining the effort as a separate “project,” emerged as a key factor influencing the ability to maintain systems of care over time. State commitment and State involvement in the system

of care also reportedly play a critical role in sustainability. All of these factors reportedly lead to continuing support and funding for the systems of care, as well as diffusion of the approach to other communities across States.

Strategies for Sustainability

The study investigated a range of strategies for sustainability to determine the extent to which they were considered to be effective. As shown in Table 2, none of the strategies was rated as “completely effective” or “very effective”; they were largely rated in the “moderately effective” range. However, seven strategies approached the “very effective” level with a mean rating of 3.5 or higher

Table 2
Effectiveness of Sustainability Strategies

| General Strategies | Phase I Sites: Effectiveness Rating |
|---|--|
| Most Effective Strategies | |
| Cultivating strong interagency relationships | 3.91 |
| Infusing the system-of-care approach into broader system | 3.66 |
| Involving stakeholders | 3.65 |
| Establishing a strong family organization | 3.60 |
| Using evaluation results | 3.55 |
| Creating an ongoing focal point for managing the system of care | 3.57 |
| Making policy/regulatory changes for systems of care | 3.50 |
| Moderately Effective Strategies | |
| Providing training on system-of-care approach | 3.42 |
| Creating an advocacy base | 3.42 |
| Mobilizing resources | 3.31 |
| Generating political/policy-level support | 3.28 |
| Scale: 1 = Not effective, 2 = Somewhat effective, 3 = Moderately effective, 4 = Very effective, 5 = Completely effective. | |

(see Table 2). The high effectiveness ratings given to these strategies can perhaps teach communities how to prioritize their efforts when working toward creating sustainable systems of care.

Specific attention to a range of financing strategies confirmed the challenges faced by the sites with respect to financing. None of the strategies was rated as “completely effective” or “very effective,” and only one came close to “very effective” with a mean rating of over 3.5 (see Table 3). In fact, most of the financing strategies were rated on the low end of the “moderately effective” range or in the “somewhat effective” range. The two financing strategies that appear to have yielded the most success in enabling sites to maintain funding for their services are increasing the ability to obtain Medicaid reimbursement and obtaining new or increased State funds. Both of these require strong State involvement, commitment, and partnership, confirming the critical impact of these factors on the sustainability of systems of care.

Implications for Enhancing Sustainability

The implication of this study is that for systems of care to be sustained, they need to maximize certain

particularly important factors to the extent possible. These can be influenced by targeted efforts, including (a) infusing the system of care and services into the larger system rather than maintaining a separate project or program peripheral to the system that can disappear when the grant period ends; and (b) nurturing State commitment and involvement, a partnership that will play a critical role in the future of the system of care in each community and statewide.

It is likely that a combination of strategies offers the best opportunity to maintain systems of care over time.

Further, no one or two sustainability strategies will guarantee success in sustaining systems of care. It is more likely that a number of strategies in combination offer the best opportunity to maintain systems of care over time. However, study results indicate that several strategies are likely to have positive results, such as cultivating strong interagency relationships, involving stakeholders, establishing a strong family organization, using evaluation results, creating an ongoing focal point for system management, making policy/regulatory

Table 3
Effectiveness of Financing Strategies

| Financing Strategies | Phase I Sites: Effectiveness Rating |
|---|--|
| Most Effective Strategies | |
| Increasing ability to obtain Medicaid reimbursement | 3.72 |
| Obtaining new/increased State funds | 3.46 |
| Moderately Effective Strategies | |
| Administrative claiming | 3.33 |
| Coordinating categorical funds | 3.29 |
| Leveraging funding sources | 3.27 |
| Refinancing | 3.25 |
| Redeploying from higher to lower cost services | 3.24 |
| Obtaining grants | 3.20 |
| Reinvesting money saved by redeploying or reducing | 3.20 |
| Creating partnerships with non-MH systems | 3.17 |
| Obtaining new/increased Federal funds | 3.09 |
| Decategorizing funding streams | 3.05 |
| Pooling or blending funds from several agencies | 3.05 |
| Creating new revenue through unrelated activities | 3.00 |
| Least Successful Strategies | |
| Obtaining new/increased foundation funds | 2.96 |
| Operating more efficiently | 2.96 |
| Obtaining new/increased private or corporate funds | 2.95 |
| Fundraising | 2.92 |
| Using in-kind space donation | 2.83 |
| Obtaining new/increased local funds | 2.62 |
| Charging fees for services | 2.50 |

Scale: 1 = Not effective, 2 = Somewhat effective, 3 = Moderately effective, 4 = Very effective, 5 = Completely effective.

changes for systems of care, and infusing the approach into broader system. For financing, the strategies that stood out as particularly effective include focusing on maximizing the use of

Medicaid to finance the array of services and supports and looking to new or increased State funding, not only from mental health but from other partner agencies to support care.

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